Ovarian Stimulation With Letrozole Does Not Raise Breast Cancer Recurrence Risk

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By Will Boggs, MD

NEW YORK (Reuters Health) Jun 16 - Fertility preservation using ovarian stimulation with letrozole and gonadotropins does not seem to increase the risk of recurrence in women with breast cancer, according to a report in the June 1st Journal of Clinical Oncology.

"Women with breast cancer can preserve their fertility by egg and embryo freezing in a relatively safe manner," Dr. Kutluk Oktay from the Institute for Fertility Preservation, New York, told Reuters Health. "Fertility drugs can be used for this purpose in conjunction with letrozole without significant exposure to estrogen."

Dr. Oktay and colleagues investigated whether ovarian stimulation with concurrent use of gonadotropins and letrozole before chemotherapy affects breast cancer recurrence rates and prognosis. Two hundred fifteen women were enrolled in the study; 79 underwent the procedure and the remaining 136, who did not undergo a procedure to preserve fertility, served as controls.

Ovarian stimulation increased the median time between surgery and chemotherapy from 33.46 days to 45.06 days, the report indicates.

There were 3 (3.8%) recurrences or contralateral breast cancers during a median 23.4 months of follow-up in the study group, compared with 11 (8.1%) during a median 33.05 months of follow-up in the control group.

Relapse-free survival did not differ between the treatment and control groups, the authors report.

The influence of tumor size, grade, number of lymph nodes, estrogen- and progesterone-receptor status, and other variables on outcomes did not differ between the study group and the control group.

Ten women in the ovarian stimulation group eventually underwent embryo replacement to their own uterus (4 patients) or to a gestational carrier (6 patients) after breast cancer treatment, resulting in 8 pregnancies and 5 deliveries. There was also 1 spontaneous
pregnancy (ongoing) in the study group.

In the control group, there were 3 spontaneous pregnancies resulting in 2 miscarriages and 1 live birth.

"Breast cancer is the most common cancer in reproductive age women," Dr. Oktay explained. "They should always be given the option to preserve fertility. We had women being diagnosed at 39 and able to have 3 children with embryos frozen using this protocol despite becoming menopausal after chemotherapy."

"Our aim is to have follow-up information on these patients for up to 20 years to rule out any late effect," Dr. Oktay added. "We are also considering molecular studies that would look at some of the acute risks."